Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number 09/942798 0425 - 08969

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			3 /			T.	1	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	· 710.00	
TOTAL CHARGEABLE CLAIMS			3 / minus 20=		• 11			X\$ 9=	•	OR	X\$18=	198	
INDEPENDENT CLAIMS			U minus 3 =		6			X40=		OR	X80=	-	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	_	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	908	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALLE	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent		Minus	***	T CI AIN4	_		X40=		OR	X80=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM		,	+135=	•	OR	+270=		
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)			mn 2)	(Column 3)							
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	. 19	Minus	3	/	=		X\$ 9=		OR	X\$18=		
AME	Independent	. 2	Minus	··· S	2		1	X40=		OH	X80=		
L	FIRST PRESE	NTATION OF M	OLTIPLE DEP	ENDEN	I CLAIM		j	+135=		OR	+270=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
ENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV PAI	HEST MBER IOUSLY AFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	. 19	Minus	:0	2/	-]]	X\$ 9=		OR	X\$18=		
AME	Independent	NTATION OF M	Minus DE	ENDEN	3 T C A A		 	X40=		OR	X80=		
_	FINST PRESE	MINIONOF	OLIFE DE	CINUEN	I CLAIM		1	+135=		OR	+270=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE ADDIT, FEE											TOTAL ADDIT. FEE		
"	"If the "Highest Nu The "Highest Nur ,	imber Previously f mber Previously Pa	Paid For IN THI aid For (Total o	S SPACE r Indepen	is less that dent) is the	ın 3, enter "3." highest numb			propriate bo	x in c			